

Department of Community Development, P. O. Box 427, Herndon, Virginia 20172-0427

## APPLICATION FOR AN ADMINISTRATIVE ADJUSTMENT FOR RESIDENTIAL FENCE OR WALL\* LOCATION or NON-RESIDENTIAL SECURITY FENCE OR WALL\* LOCATION

\*not including retaining walls

The undersigned hereby applies for an Administrative Adjustment for the location of a fence or wall under Sections 78-517, Fencing, wall and hedge standards, and 78-202.5, Administrative Adjustments, of the Herndon Town Code. The undersigned certifies that all information in this application is true and correct and that the requirements of this application have been read and are understood. Submittal of this form with **original signatures is required. PLEASE PRINT OR TYPE** (Unless otherwise indicated.)

Subject Property Information				
Address of Subject Property:				
Name of Business Establishment Associated with this Application:				
Building/Development Name:				
Lot area (site area):				
Type of Use (please specify whether commercial, industrial, office, residential, or other):				
Related Applications or Plans (i.e. Site Plan, Plan Revision, SE, BZA) and Date of Approval (if applicable):				
Property Owner Information				
Name and Title of Property Owner:				
Mailing Address of Property Owner:				
Telephone Number(s) where Property Owner may be reached:				
Fax number of Property Owner:				
E-mail address of Property Owner:				
Signature of Property Owner:				
	(Original Signature Required)			

## Administrative Adjustment for a Fence or Wall Location - continued

Applicant Information (If different than owner:)	Circle one:	agent	representative	contractor	tenant
Name and Title of Applicant:					
Mailing Address of Applicant:					
Telephone Number(s) where Applicant: may be reached:					
Fax number of Applicant:					
E-mail of Applicant:					
Signature of Applicant:	(0 : !==10!===t	Dage	• 1\		
	(Original Signatu	ire Kequ	ired)		
For Office Use Only:					
Application Received by:		Date:			
Fee Paid:	(	Case No:	<u>:</u>		
Public Hearing Date:		Action:			
Tax Map Reference Number:				Zoning Distri	ict:
Status of Taxes:	□ Delinguent				

## Administrative Adjustment for a Fence or Wall Location - continued

## APPLICATION REQUIREMENTS

<u>Item</u>	AIT LICATION REQUIREMENTS				
1	A detailed written description of what the applicant is proposing and why.				
2	One (1) completed application form with all required signatures, including the signature of the owner of the property.				
3	\$50 Application fee payable by either check or cash (credit cards are not accepted).  A boundary survey of the property showing the:  • Name and address of the property owner and applicant:				
	<ul> <li>Tax map reference number and street address of the subject property;</li> <li>Date;</li> </ul>				
	<ul> <li>Scale of drawing;</li> <li>A blank space three inches wide and five inches high for town approval stamp;</li> <li>Property lines;</li> </ul>				
	<ul> <li>Existing building(s) and use(s);</li> <li>Proposed fence or wall location;</li> <li>Height of the proposed fence or wall;</li> </ul>				
	<ul> <li>Location of the architectural front of the principal structure on the lot; and</li> <li>Location of the architectural front of the principal structures on abutting parcels.</li> </ul>				
5	Photographs of all sides of the property and the streets abutting the property; and				
6	Labeled photographs of all sides of the existing building.				